

Mr. RODRIGUEZ. Mr. Speaker, while we have a long way to go, the Veterans Benefit Act is a step in the right direction. The compensation legislation before us would streamline the rating system of certain service-connected illnesses, as well as provide a cost-of-living adjustment to those receiving disability compensation benefits.

As a member of the committee, I am proud to join the bipartisan efforts to improve the quality and deliver the veterans benefits program. Veterans should not be left wondering if the Federal Government is going to fulfill its promise. Those who have received service-connected disability benefits can expect a cost-of-living benefit. So can their survivors. For Vietnam veterans who were exposed to Agent Orange and now suffer from diabetes, the Veterans Benefit Act acknowledges their entitlement to service-connected disabilities benefits.

In addition, Gulf War veterans suffering from ill-defined illnesses which modern medical technology cannot really diagnose, the Veterans Benefit Act will likewise extend the presumption of service connections. Veterans who suffer from disabilities should not be abandoned and their disabilities should not be ignored simply because doctors cannot diagnose the causes.

Finally, I am supportive of a 2-year nationwide pilot program to include in the bill expansion of the availability of hours of the VA 1-800 toll-free information service. Veterans worked around the clock for us, and they deserve for us to do the same for them. Our freedoms did not come free, and for veterans the physical and psychological wounds of the war do not go away.

I want to take this opportunity to thank the gentleman from New Jersey (Mr. SMITH) for his hard work, and that of my distinguished colleague, the gentleman from Illinois (Mr. EVANS), the ranking member.

Mr. SMITH of New Jersey. Mr. Speaker, I yield 2 minutes to the gentleman from Mississippi (Mr. PICKERING), who carries on the tradition of our former chairman, Mr. Montgomery.

Mr. PICKERING. Mr. Speaker, I rise in strong support of H.R. 2540, the Veterans Benefit Act. Today we have 250,000 veterans in Mississippi; 54,000 are World War II veterans, 77,000 are Vietnam veterans, 39,000 served in Korea, and 33,000 are Gulf War vets. This bill provides them compensation benefits and COLA.

It recognizes the 33,000 Gulf War veterans and gives them an extension of the presumptive period to recognize the mysterious illnesses that they returned with, and provides them we hope with the care they have so richly earned.

It provides for a great new pilot program to provide information, as the gentleman from Louisiana (Mr. BAKER) mentioned, a voice-to-voice, a person-to-person providing the care they need to get the care they deserve.

Mr. Speaker, I want to commend the gentleman from New Jersey (Mr.

SMITH) for his leadership. He has been aggressive and assertive in representing veterans across this country and in my State of Mississippi.

Secretary Principi has done a tremendous job. We are making progress because we know to recruit and retain the young people today in our military force, we must show the care and the commitment, the respect and the appreciation to the veterans who served yesterday.

This bill, along with H.R. 1291, the Montgomery GI bill, is a significant step in the right direction, and for that I give great support and commendation to the committee and to the chairman and to the other Members and to this bill.

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Mr. EVANS. Mr. Speaker, I yield 2 minutes to the gentlewoman from California (Mrs. CAPPS).

(Mrs. CAPPS asked and was given permission to revise and extend her remarks.)

Mrs. CAPPS. Mr. Speaker, I rise in strong support of this bill. I want to thank the gentleman from New Jersey (Mr. SMITH) and the gentleman from Illinois (Mr. EVANS) for their leadership on this important legislation.

I wish to highlight a couple of provisions contained in H.R. 2540 that I have worked on for some time. The first provision would end a Catch-22 faced by vets and VA researchers. Currently vets can lose benefits for an "undiagnosed illness" if participation in a VA study determines the illness and it is not service connected. This issue was brought to my attention last year. VA researchers told me of concerns that some vets might not participate in an ongoing study to look at possible connections between Gulf War service and Lou Gehrig's disease. I learned that some vets feared losing needed benefits by participating in the study. This lack of participation could compromise an important study that could benefit vets and all people suffering from Lou Gehrig's disease. H.R. 2540 fixes this problem by letting VA protect compensation in such cases. This provision is based on a bill the gentleman from Illinois (Mr. EVANS) and I introduced earlier this year.

H.R. 2540 also contains provisions to temporarily expand hours for VA's toll-free information lines to at least 12 hours a day Monday through Friday and 6 hours on Saturday. I have a lot of interest in this subject having introduced legislation for the last 2 years which would operate information lines 24 hours a day, 7 days a week. My bill would also get the information line to include crisis intervention services. I am very pleased that the committee has included provisions to keep this information line open longer hours. It will make it easier for vets to get information on the benefits that they have earned. I look forward to working with the committee as we follow up on this important pilot program.

I urge my colleagues to support this bill.

Mr. Speaker, I rise today in strong support of H.R. 2540, the Veterans Benefits act of 2001. As an original cosponsor, I am proud to speak on behalf of this important legislation.

First, I would like to thank Mr. SIMPSON, the Chairman of the Subcommittee on Benefits and Mr. REYES, the Ranking Member for their excellent leadership on the issue of improving services for our nation's veterans. I would also like to commend Mr. SMITH, Chairman of the full Committee and Mr. EVANS, the Ranking Member for their leadership.

This bill offers several important initiatives to improve the lives of our veterans. I am especially pleased about the inclusion of the provisions in Sec. 203 and Sec. 407. I am pleased to have worked closely with the Subcommittee on these two critical areas.

Sec. 203 would eliminate a classic "Catch-22" situation faced by our veterans and the VA in medical research studies and is based on legislation, H.R. 1406, the Gulf War Undiagnosed Illness Act of 2001, Representative Evans and I introduced earlier this year. Under the current scenario, veterans who are being compensated on the basis of an "undiagnosed illness" and who participate in a VA-sponsored medical research study, could lose their benefits if they are "diagnosed" with a non-service related condition during the course of the study.

Last year, VA personnel told me about their concerns that if veterans declined to participate in a study because of the risk of losing benefits, the data may be insufficient and render the study unusable. These concerns were raised in connection with a study being done last year to determine a possible connection between ALS and service in the Gulf War.

This legislation would give the VA the authority to protect compensation for undiagnosed illnesses when the VA determines that such protection is needed to ensure adequate participation by veterans in VA-sponsored medical research. This guarantee is particularly important for research that requires a high level of participation to achieve valid findings. I would again like to commend Ranking Member EVANS for his leadership in this area.

Sec. 407 of this bill establishes a pilot program at the VA to expand access to veterans benefits counselors. Under the bill, the hours would be expanded to no less than 12 hours a day, Monday through Friday and no less than six hours on Saturday. This expansion of access is essential to provide our veterans with the services that they richly deserve.

I am proud to have authored H.R. 1435, the Veterans Emergency Telephone Service Act of 2001. This bill would address the pressing need of some of our nation's veterans for 24 hour access to crisis intervention services.

By virtue of their service and sacrifice on behalf of this nation, our veterans deserve the very best support services we can provide. Such moments don't always occur during business hours, Monday through Friday. The bill before us takes critical steps to fulfill our obligation to our veterans.

I look forward to continuing to work closely with the Committee on ways in which veterans' access to telephone service can be improved and expanded even more in its hours of availability and the services offered. I strongly urge an aye vote on H.R. 2540.